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- ~~Mr. Hasston~~  
1. ~~Dr. Didsbury~~  
2. ~~Mr. Morley Parry~~  
3. ~~Mr. Perry~~

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URBAN DISTRICT COUNCIL OF RISHTON

# ANNUAL REPORT

of the

MEDICAL OFFICER OF HEALTH

including details of work done by the

PUBLIC HEALTH INSPECTOR

FOR THE DISTRICT OF RISHTON FOR THE

YEAR ENDED 31st DECEMBER, 1966

Medical Officer of Health—

R. C. WEBSTER,  
T.D., B.Sc., M.D., D.P.H., D.C.H.

19 St. James Street,  
ACCRINGTON.

Telephone: Accrington 34223

Public Health Inspector—

S. PILKINGTON,  
A.R.S.H., M.A.P.H.I.,

Council Offices, Brook Street,  
RISHTON, Nr. Blackburn.

Telephone: Gt. Harwood 2264/5





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# To the Chairman and Members *OF THE* Urban District of Council of Rishton

Council Offices,  
RISHTON.

May, 1967.

Mr. Chairman and Gentlemen,

I have the honour to present my report on the Health administration of Rishton for the year ended 31st December, 1966.

## STATISTICS AND SOCIAL CONDITIONS OF THE AREA

Area in acres .....	2.878.4
Rateable Value .....	£191,650
Estimated Product of 1d. Rate .....	£768
Population 1961 Census .....	5,431
Estimated 1965 Mid-year Population .....	5,400
Estimated 1966 Mid-year Population .....	5,440

Rishton is a compact Urban area whose chief industries are cotton, felt and carpet weaving, paper making, paint and varnish manufacture, paper string manufacture, slipper and shoe manufacture and plastic products.



## VITAL STATISTICS

Death Rate (crude) .....	15.6
Death Rate (adjusted) .....	14.7
Mortality Rate Malignant Neoplasms .....	3.49
Live Birth Rate (crude) .....	15.1
Live Birth Rate (adjusted) .....	17.0
Stillbirth Rate per 1,000 total births .....	12.0
Maternal Mortality Rate per 1,000 live births	—
Infant Mortality Rate per 1,000 live births .....	12.2
Neo-Natal Mortality Rate per 1,000 live births	—
Perinatal Mortality Rate per 1,000 live births	12.0

There were 82 live births and one stillbirth registered during 1966 and 85 deaths. Live births registered during the year show an increase of 4 over last year's figure and deaths a decrease of 3.

## INFECTIOUS DISEASES

The only notified cases of Infectious Diseases this year were 5 cases of measles, as these 5 were notified by Private Practitioners resident outside the area I feel sure that the figures do not reflect a true picture of the cases notifiable Infectious Diseases occurring in the area.

## LOCAL HEALTH SERVICES

The Local Health and Welfare Services under the National Health and Assistance Acts are administered in Rishton by the Lancashire County Council, Number 5 Health Division.

Miss J. Lord is the Health Visitor/School Nurse for the Rishton District and the following are the services administered at the Child Welfare and School Clinic, 108 High Street, Rishton. Telephone: Great Harwood 3177.

1. Child Welfare Clinic ..... Each Tuesday afternoon.
2. Immunisation Clinic ..... As and when arranged.
3. Orthopaedic Clinic ..... 4th Wednesday each month  
(by appointment).
4. Ophthalmic Clinic ..... 1st and 3rd Friday  
(by appointment).
5. Dental Clinic ..... Each Monday and Thursday.
6. Physiotherapy ..... Each Wednesday (all day).

Wherever possible appointments should be made before the Clinics (under headings 3 to 6) are attended, though the Dental Officer will attend to cases of toothache without appointment.

The County Midwives for Rishton are Mrs. Phillipson, 4 Devonshire Drive, Clayton-le-Moors. Telephone: Accrington 31250, and Mrs. Hodgson, 50 Whalley Road, Great Harwood. Telephone: Great Harwood 2247.

The County District Nurses for the District are: Mrs. Brandrick, The Bungalow, Wharf Street, Rishton. Telephone: Great Harwood 2450. Mrs. Fielding, 2 Dorset Road, Rishton. Telephone: Gt. Harwood 2794, and Mr. Waddington, 55 Cliffe Street, Rishton. Telephone: Great Harwood 2495.

To obtain the Ambulance Service, ring Accrington 34834.

### STATISTICS FOR THE YEAR

	Total	Males	Females
Live Births — Legitimate .....	79 .....	41 .....	38
Live Births — Illegitimate .....	3 .....	3 .....	—
	—	—	—
	82 .....	44 .....	38
Stillbirths .....	1 .....	— .....	1
Deaths .....	85 .....	41 .....	44

### POPULATION FIGURES OVER THE LAST TEN YEARS

	Registrar General's Estimated figure	Births	Deaths	Births & Deaths Differential
1966 .....	5,440 .....	82 .....	85 .....	— 3
1965 .....	5,400 .....	78 .....	88 .....	— 10
1964 .....	5,370 .....	83 .....	83 .....	—
1963 .....	5,440 .....	71 .....	84 .....	— 13
1962 .....	5,450 .....	97 .....	77 .....	+ 20
1961 .....	5,460 .....	82 .....	77 .....	+ 5
1960 .....	5,460 .....	71 .....	77 .....	— 6
1959 .....	5,470 .....	70 .....	66 .....	+ 4
1958 .....	5,500 .....	85 .....	87 .....	— 2
1957 .....	5,540 .....	58 .....	61 .....	— 3

## SUMMARY CAUSES OF DEATH

	Males		Females		Total
Malignant Neoplasms Stomach .....	1	.....	1	.....	2
Malignant Neoplasms Lung Bronchus .....	5	.....	2	.....	7
Other Malignant & Lymphatic Neoplasms .....	4	.....	6	.....	10
Vascular Lesions of Nervous System .....	6	.....	7	.....	13
Coronary Disease, Angina .....	16	.....	12	.....	28
Hypertension with Heart Disease .....	1	.....	—	.....	1
Other Heart Disease .....	2	.....	6	.....	8
Other Circulatory Disease .....	2	.....	2	.....	4
Influenza .....	1	.....	1	.....	2
Pneumonia .....	1	.....	—	.....	1
Bronchitis .....	1	.....	—	.....	1
Ulcers of Stomach & Duodenum .....	—	.....	1	.....	1
Other Defined or Ill-Defined Diseases .....	1	.....	2	.....	3
All Other Accidents .....	—	.....	3	.....	3
Suicides .....	—	.....	1	.....	1
	41	.....	44	.....	85

## PUBLIC HEALTH TUBERCULOSIS REGULATIONS, 1930

The number of cases on the Tuberculosis Register at the 31st December, 1966, compared with 1965.

	Pulmonary			Non-Pulmonary			Total		
	M	F	Total	M	F	Total	M	F	Total
1965.....	3	1	4	—	—	—	3	1	4
1966.....	3	1	4	—	—	—	3	1	4

CASES OF INFECTIOUS DISEASES NOTIFIED DURING  
THE YEAR

Notifiable Diseases	Total Cases at all ages										Age Unknown
		0	1	2	3	4	5	10	12	25 and over	
Measles .....	5	—	—	1	1	3	—	—	—	—	—



## INFECTIOUS DISEASES NOTIFIED OVER THE LAST FIVE YEARS

Diseases	1962	1963	1964	1965	1966
Scarlet Fever .....	—	—	—	1	—
Measles .....	6	20	197	9	5
Dysentery .....	11	—	—	—	—
Ophthalmic Neonatorum .....	—	1	1	—	—
Puerperal Pyrexia .....	—	—	1	1	—

In making my report I wish to thank the Chairman and Members of the Council for their support and encouragement throughout the year, and other officials and staff for their friendly help.

Yours faithfully,

R. C. WEBSTER,  
Medical Officer of Health.



Council Offices,

Brook Street,

RISHTON,

Nr. Blackburn.

## **REPORT OF THE PUBLIC HEALTH INSPECTOR**

**For the year ended 31st December, 1966**

I have the honour to present my Annual Report for the year 1966.

The weekly collection of household refuse has been maintained by the same number of staff in spite of increased properties and greater bulk. The paper sack system has played no small part in this and the extension of the scheme plus a larger capacity vehicle will allow for still further expansion. The salvage position has been hit by staff sickness.

Rishton is a residentially expanding area and the service must keep ahead of this development.

I am pleased to report that a plan of smoke control areas has been adopted and work in this direction will commence shortly.

Yours faithfully,

S. PILKINGTON,

Public Health Inspector.

## ENVIRONMENTAL HYGIENE

Grants have been introduced towards the improvement of inadequate Water Supplies. Whilst individuals have taken advantage of the scheme it is very difficult to get unanimous agreement between neighbours to have joint schemes. This would appear to be because in any row of houses the occupiers frequently cover several generations and whilst it would appear that the younger generation are desirous of the improvement the older generation are satisfied with the existing inadequate supply.

Plans have been drawn up for the improvement in the method of Sewage Disposal covering the Blackburn Road properties now served by inadequate Septic Tanks. It is hoped that this work of improvement will soon be in progress.

## PUBLIC CLEANSING

The Paper Sack system now being introduced, in operation now at approximately 400 properties, has been the main reason why it has been possible to maintain a weekly collection, in the face of increased numbers of properties, reduced working hours and more bulky refuse. A further step in this direction would be the disposal of the unhygienic side loading vehicle, and the introduction of a vehicle incorporating rear loading and some method of compaction. This would reduce tipping time and increase loading time.

Another difficulty has been the amount of sickness amongst the House Refuse staff which has meant virtually that during the whole of the year the service has been operated with a deficiency of staff.

## SALVAGE

Waste Paper					Tons Cwts. Qrs.			£	s.	d.
January	.....	.....	.....	.....	4	11	2	.....	34	6 3
February	.....	.....	.....	.....	—	—	—	.....	—	—
March	.....	.....	.....	.....	—	—	—	.....	—	—
April	.....	.....	.....	.....	—	—	—	.....	—	—
May	.....	.....	.....	.....	4	12	—	.....	34	10 0
June	.....	.....	.....	.....	5	14	—	.....	42	15 0
July	.....	.....	.....	.....	—	—	—	.....	—	—
August	.....	.....	.....	.....	2	2	—	.....	15	15 0
September	.....	.....	.....	.....	—	—	—	.....	—	—
October	.....	.....	.....	.....	3	15	1	.....	18	16 3
November	.....	.....	.....	.....	4	2	—	.....	20	10 0
December	.....	.....	.....	.....	—	—	—	.....	—	—
					24	16	3	.....	166	12 6



	Tons	Cwts.	Qrs.		£	s.	d.
Ferrous Metals .....	1	8	2	—	8	11	0
Non-Ferrous .....				99	9	0	0
Trade Tipping .....					27	8	0

## FOOD PREMISES

Inspections have been made at frequent intervals at all food premises in the area. First class co-operation has been had from all food traders in general. The majority of food premises are small businesses run as family businesses where the attention to personal hygiene in the most part is more particular.

## MILK

Brucellosis has again been the main source of trouble in the milk supply. Several years of concentrated work in this field have not obliterated the problem entirely as 89 samples produced 12 positive results and 7 equivocal leaving us at the end of the year with 15 positive reactors.

It is the habit of Several Dairy Farmers in this area to maintain flying herds and it is this practice which is the main source of the trouble. The co-operation of the farmers has been sought, and readily given in, sampling these beasts before their milk is introduced to the Public supply or the animal to the herd.

## SMOKE CONTROL

A policy of Smoke Control zones has been adopted by the Council, at the present time this plan entails the introduction of zones over a period of 20 years to be completed in 1987. This plan is completely fluid and can be speeded up should this be desirable the first zone is intended to be brought into operation in 1968.

**HOUSING**

Houses inspected for defects .....	46
Number of inspections made for the purpose .....	173
Number of dwelling houses found to be unfit for human habitation .....	—
Number of dwelling houses found not in all respects fit for habitation .....	33
Number of dwelling houses rendered fit by informal action .....	29
Number of dwelling houses in respect of which formal notice was served .....	—
Number made fit by Local Authority after service of formal notice .....	—
Certificates of Unfitness applied for .....	—
Certificates of Unfitness granted .....	—
Certificates of Revocation applied for .....	—
Certificates of Revocation granted .....	—

**STANDARD GRANTS**

Applications submitted to Local Authority .....	46
Approved by Local Authority .....	46
Work completed .....	46

**FACTORIES ACT 1937 AND 1948**

	Number on Register	Inspections	Written Notices	Occupiers Prosecutions
1. Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authority .....	—	.....	—	.....
2. Factories not included in (1) in which Section 7 is enforced by the Local Authority .....	34	.....	—	.....
3. Other premises in which Section 7 is enforced by the Local Authority (excluding outworkers premises) .....	—	.....	—	.....
	34	.....	—	.....



